

PRIMARY  
GENERAL ELECTION

RECORD OF REQUEST FOR POLITICAL BROADCAST TIME OVER WFLA-TV

1. NAME AND TITLE OF PERSON MAKING REQUEST Orlando Cicilia
2. ADVERTISING AGENCY, IF ANY OC3 Productions
3. (a) NAME AND ADDRESS OF ORGANIZATION PAYING FOR TIME  
Karen Harrington For Congress  
5481 Stirling Rd  
Davie, FL 33314
- (b) NAME AND ADDRESS OF ORGANIZATION FURNISHING  
ANNOUNCEMENT/PROGRAM, IF DIFFERENT FROM ABOVE
4. BROADCAST TO FAVOR CANDIDACY OF Karen Harrington
5. PUBLIC OFFICE THAT CANDIDATE IS SEEKING Congress
6. POLITICAL PARTY TO WHICH CANDIDATE BELONGS Rep
7. DATE OF REQUEST 10/24
8. NATURE OF REQUEST  
☒ Request to purchase announcement(s) and/or program(s)  
☐ Request for broadcast time at no cost to candidate or supporters  
☐ Other request  
(Give details, e.g., broadcast times, dates, length, reason for request, etc.)
9. DISPOSITION MADE OF REQUEST (Attach explanatory statement necessary, and attach contract)  
☒ Granted (Give dates, times, length) 10/24  
☐ Denied (Give reason)  
☐ Withdrawn (Give reason)  
☐ Availabilities offered (Give dates, time, length)
10. SUBSEQUENT DEVELOPMENTS, IF ANY (Give details, attach explanatory statement, if necessary, of preemption, rescheduling, makegoods, etc.)
11. AMOUNT OF CHARGES:  
\$ \_\_\_\_\_ (GROSS) \$ \_\_\_\_\_ (NET) CONTRACT # \_\_\_\_\_

NAME OF CBS EMPLOYEE  
COMPLETING THIS FORM Susan Puie

Copy: Law Department